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ABSTRACT

This case study was developed as a supplement to the U. S. Department of Education publication Understanding Evaluation: The Way to Better Prevention Programs. Its purpose is to help readers get a feel for what is involved in setting up an evaluation of a college alcohol and other drug (AOD) prevention program. Although Understanding Evaluation specifically addresses prevention work in secondary schools and presents a case example of the fictional Wood County School District to illustrate the evaluation process, the principles of evaluation discussed are applicable to schools at any level, including the college or university campus. The fictional Woodson College case study is a composite of the evaluation experiences of a number of colleges and universities woven together to help readers tailor the information in Understanding Evaluation to meet their own campus needs, In the case example, administrators at Woodson College instruct the director of prevention services to develop an evaluation plan for the Woodson's three AOD prevention programs. One program is a curriculum infusion project, the second is a social norms media campaign, and the third is a peer education project. Discusses and evaluates each of the three projects. Provides a partial list of publications and fact sheets/prevention updates available from the Higher Education Center for Alcohol and Other Drug Prevention. (Author/MKA)

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ED 460 309

A College Case Study

A SUPPLEMENT TO UNDERSTANDING EVALUATION: THE WAY TO BETTER PREVENTION PROGRAMS

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U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
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A College Case Study

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Contents

Preface	v
Introduction	vii
Woodson College Broadens its Alcohol and Other Drug Prevention Programming	1
A Comprehensive Prevention Plan	2
Objectives and Outcomes	3
Initial Reports from the Directors	3
Curriculum Infusion Program	3
Social Norms Media Campaign	5
Peer Education Program for Intercollegiate Athletes and Fraternity and Sorority Members	6
Intended Outcomes for Overall Prevention Strategy	7
Choosing Measures	10
Evaluation Measures Proposed by the Directors	10
Curriculum Infusion Program	10
Social Norms Media Campaign	10
Peer Education Program for Intercollegiate Athletes and Fraternity and Sorority Members	11
Assessing Impact	13
Establishing That Implementation of the Programs Took Place	16
Evaluating Student Outcomes	19
Notes	23
Center Publications	24

Preface

The Higher Education Center for Alcohol and Other Drug Prevention was established by the U.S. Department of Education in 1993 to assist institutions of higher education in developing and carrying out alcohol and other drug (AOD) prevention programs that will promote campus and community safety and help nurture students' academic and social development.

To accomplish this mission, the Center seeks to increase the capacity of postsecondary schools to develop, implement, and evaluate programs and policies that are built around environmental management strategies. Environmental management means moving beyond general awareness and other education programs to identify and change those factors in the physical, social, legal, and economic environment that promote or abet alcohol and other drug problems.

Clearly, stemming the use of alcohol and other drugs is not something that college administrators alone can achieve. Top administrators, especially presidents, must exercise leadership, but their success will depend ultimately on their ability to build a strong coalition of both on-campus and community interests. The better AOD prevention programs are campuswide efforts that involve as many parts of the college as possible, including students, staff, and faculty. For this reason, the Center emphasizes team-focused training and technical assistance work.

Building coalitions with local community leaders is also key. College campuses do not exist in isolation. AOD prevention planners need to collaborate with local leaders to limit student access to alcohol, prevent intoxication, and support the efforts of local law enforcement. The Center therefore seeks to motivate and train academic leaders to work with local community representatives, while also joining with national organizations that urge local coalitions to increase their outreach to academic institutions.

Specific Center objectives include promoting (1) college presidential leadership on AOD issues; (2) formation of AOD task forces that include community representation; (3) reform of campus AOD policies and programs; (4) a broad reexamination of campus conditions, including academic standards and requirements, the campus infrastructure, and the academic calendar; (5) formation of campus-community coalitions that focus on environmental change strategies; and (6) the participation of individuals from the higher education community in state-level and other associations that focus on public policy. The Center also seeks to increase the capacity of colleges and universities to conduct ongoing process and outcome evaluations of AOD prevention activities, both on campus and in the surrounding community.

This publication represents one piece in a comprehensive approach to AOD prevention at institutions of higher education. The concepts and approaches it describes should be viewed in the broader context of prevention theory and the approaches affirmed by the U.S. Department of Education and promoted by the Center in its training, technical assistance, publication, and evaluation activities.

For information on Center services, please contact:

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Introduction

The following case study was developed as a supplement to the U.S. Department of Education publication *Understanding Evaluation: The Way to Better Prevention Programs*. Its purpose is to help readers get a feel for what is involved in setting up an evaluation of a college alcohol and other drug (AOD) prevention program. While *Understanding Evaluation* specifically addresses prevention work in secondary schools and presents a case example of the fictional Wood County School District to illustrate the evaluation process, the principles of evaluation discussed are applicable to schools at any level, including the college or university campus.

The fictional Woodson College case study is a composite of the evaluation experiences of a number of colleges and universities woven together to help readers tailor the information in *Understanding Evaluation* to meet their own campus needs. In the case example, administrators at Woodson College instruct the director of prevention services to develop an evaluation plan for the Woodson's three AOD prevention programs. One program is a curriculum infusion project, the second is a social norms media campaign, and the third is a peer education project. The case example walks readers through the steps Woodson College takes to design and implement a comprehensive evaluation of its AOD prevention programs. With this illustration in hand, prevention specialists, administrators, and others concerned with preventing AOD use on college campuses should find *Understanding Evaluation* a practical guide in planning evaluations for their own campuses.

Woodson College Broadens Its Alcohol and Other Drug Prevention Programming and Strengthens Its Evaluation Strategy

At Woodson College, a midsize institution of 9,000 students with a mix of residential and commuter students, administrators were becoming increasingly aware of problems both on and off campus resulting from students' alcohol and other drug (AOD) use and associated violence. Recently a group of its students was arrested after a bar brawl in town, and a high-profile sexual assault charge against a top male athlete had led to a barrage of negative publicity about the school. Although these incidents were more extreme than usual for the campus, administrators and health program planners realized they would be missing the mark if they saw them as the isolated acts of a few problem students.

Health educators in several areas of the college, including the student health clinic and the athletic department, had begun to develop plans to implement new AOD prevention programs, but administrators were beginning to think that more work was needed to coordinate efforts across the different parts of the campus and to evaluate the programs. The recent incidents, the administrators agreed, were indicators that it was time to reassess the AOD-related climate on campus and develop a more comprehensive prevention strategy. And because they were committing the additional resources and staff time to launch broad-based prevention programs, they also wanted an evaluation plan to determine how well the programs were implemented and how effective they were in changing AOD use and associated violence on campus.

Once the administrators had reached consensus on the need for evaluation, they issued a memo to the head of prevention services, Ms. Anderson, outlining their expectations for an ongoing assessment of the scope of program implementation and tracking of AOD use on campus. They wanted to see a formal evaluation plan within three months and a report on results at the end of each academic year. Beyond these instructions, they left it up to Ms. Anderson to come up with the best strategy for assessing the outcomes of the programs.

A Comprehensive Prevention Plan

Several months before the administration called for more a concerted evaluation effort, Ms. Anderson had attended a regional conference on campus AOD prevention programs and met with a number of other educators to share ideas and experiences relating to prevention programming on their campuses. After the conference, Ms. Anderson and her staff conducted some follow-up research to find out more about programs tried on campuses outside of their region and around the country and settled on three programs that appeared to be especially promising and well suited to the needs of Woodson College.

The first component of Woodson's three-pronged prevention strategy was a curriculum infusion program, where AOD prevention content was integrated into the academic curriculum in a range of courses offered on campus. The second, a social norms approach, was designed to reduce binge drinking rates by correcting the widespread misperception that the majority of college students typically binge drink. The third was a peer education program, where leaders from student groups on campus with the heaviest alcohol consumption patterns—intercollegiate athletes and Greek society members—were trained to conduct prevention workshops with teammates or fraternity and sorority members.[1]

Ms. Anderson and her staff believed these three programs well suited for Woodson for a number of reasons. Several professors from different departments had expressed interest in taking a more active role in AOD prevention because of concerns about acquaintance rape and other interpersonal violence on campus. These professors were willing to advocate for curriculum infusion in their departments. A campus-based media campaign was likely to have a broad reach among students at Woodson because the majority of students read the college paper and either lived on campus or spent considerable time in campus buildings. And a peer education program targeting the Greek societies and athletic teams looked promising because the

20 fraternity and sorority houses on campus sponsored a large number of the social activities at the college, and several of the athletic teams were well known on campus and popular among the students.

Acting on the administrators' instructions, Ms. Anderson set up a meeting with the directors of the three programs to brief them on the college administration directive for a coordinated evaluation strategy. The administration, she explained, wanted baseline information collected on alcohol and other drugs on campus, assessment of each of the three programs, and documentation of any changes resulting from the programs, including reduction in violence. She appointed the three directors to the new evaluation team and asked each of them to write up a short summary of their objectives and intended short-term outcomes specific to their program.

Objectives and Outcomes

The three program directors and Ms. Anderson met a week later to discuss initial ideas on their program objectives and outcomes. The brief reports presented by the program directors follow.

Initial Reports from the Directors

Curriculum Infusion Program

Through a curriculum infusion strategy, prevention messages were being incorporated into regular course work in a variety of academic departments on campus.[2] For instance, sociology and media courses covered how the social norms of drinking were shaped by advertising and images of alcohol in other popular media. Criminal justice classes addressed ways that alcohol contributed to domestic and other interpersonal violence. Likewise, other departments incorporated prevention themes as they related to the standard curriculum.

Ideally, teachers either tested students on the prevention material or had them write papers on a related topic. Professors in six departments plus the director of the required freshman writing seminar volunteered to collaborate with the curriculum infusion program. The six collaborating departments were Sociology, Psychology, Communications, Government and Political Science, Women's Studies, and African American Studies.

Objectives

- In the first year, collaborate with six departments to have at least one course in each department infused with AOD prevention curriculum. One of the papers assigned in the required freshman writing seminar should be on an AOD prevention topic.
- In the first year, enroll 2,000 students in the freshman writing seminar and 1,000 students in infused courses in the six collaborating departments.
- In the second year, have each department offer a second infused course and add three more collaborating departments.
- In the second year, expose all 2,000 students in the freshman writing seminar and 2,000 students in infused courses in collaborating departments.

Short-term Outcomes

- Increase participation of professors as leaders in AOD prevention.
- Increase student opportunities for education on AOD risks and prevention.

Social Norms Media Campaign

The Woodson College social norms media campaign was designed to challenge the widespread misperception among students that the vast majority of their classmates engaged in binge drinking.[3] In a survey conducted the previous year, health educators had found that while 43 percent of the students binge drank, students believed that the binge drinking rate on campus was 70 percent. The educators had read other research suggesting that perceptions of binge drinking influence actual binge drinking—if students believed everyone else was doing it, they would be more likely to do it themselves. In response, Woodson College created a social norms media campaign to correct the misperception.

The campaign relied on print media—including advertising and editorial space in the college paper, press releases, flyers, and posters—to reach the majority of students. The campaign also included a series of minicontests, where hired student actors working in pairs approached small groups of students in the cafeteria and other gathering spaces to hold ad hoc AOD knowledge contests. Students who correctly stated the true drinking prevalence on campus each won a prize of $5. In addition to the contest, the student actors incorporated minisessions on AOD prevention into their routines.

Objectives

- Place two editorials per semester on AOD prevention issues in the campus paper.
- Have two articles per semester on AOD prevention issues in the campus paper.
- Purchase 10 pages of advertising space per semester for the campaign in the campus paper.
- Place posters about drinking norms on every floor of every dorm and in student gathering places such as cafeterias and lounges.
- Train four student actors to conduct educational contests throughout the school year.

- Conduct 50 educational contests per semester in campus gathering places.

Short-term Outcomes

- Change student perception of drinking prevalence on campus.
- Enhance campus social environment supporting light drinking or abstinence.

Peer Education Program for Intercollegiate Athletes and Fraternity and Sorority Members

In collaboration with the Woodson College athletic department and the campus Greek society governing council, health educators developed a peer alcohol and other drug prevention education program. While athletes and fraternity and sorority members were not the only students at the college drinking, they did, on average, drink more and more often compared with other students. Educators felt they would be best reached with a targeted prevention program. Varsity athletes and Greek society members were recruited to take on the role of health opinion leaders and were trained to conduct AOD prevention workshops with their teammates and in their fraternity and sorority houses. They also were responsible for organizing regular alcohol-free social events on campus, such as movie nights, concerts, and coffeehouses.

Objectives

- Train two peer educators from each of the 10 sororities and 10 fraternities on campus.
- Because so many men participate in football, train two peer educators from the varsity squad and two from the junior varsity squad.
- Train an additional five women and five men from the various other sports teams to be peer educators.
- Conduct at least two AOD prevention workshops per season with

each sports team and two per year in each fraternity and sorority house.

- Sponsor 10 alcohol-free social events per year, each attended by at least 50 students.

Short-term Outcomes

- Increase leadership role of athletic director, coaches, and Greek society council in AOD prevention.
- Increase AOD prevention participation of peer leaders in athletics and Greek societies.
- Increase opportunities for athletes and fraternity and sorority members to learn about AOD risks and prevention.
- Increase opportunities to participate in alcohol-free social events.
- Enhance environmental support for light drinking or abstinence among student athletes and Greek society members.

Intended Outcomes for Overall Prevention Strategy

Satisfied with the objectives and intended short-term outcomes defined by the three directors, Ms. Anderson led the evaluation team members in a brainstorming session to come up with additional intended outcomes for the overall prevention strategy. The group agreed on the following short-term, intermediate, and long-term outcomes for the three-pronged program as a whole:

Short-term Outcomes

- Increase in students' knowledge of risks of AOD use
- Change in students' attitudes toward AOD use

Intermediate Outcomes

- Reduction in AOD use
- Reduction in violence and other harm associated with AOD use
- Decreased costs associated with vandalism and property damage
- Improved academic performance
- Improved physical, mental, social, and emotional health status of all students

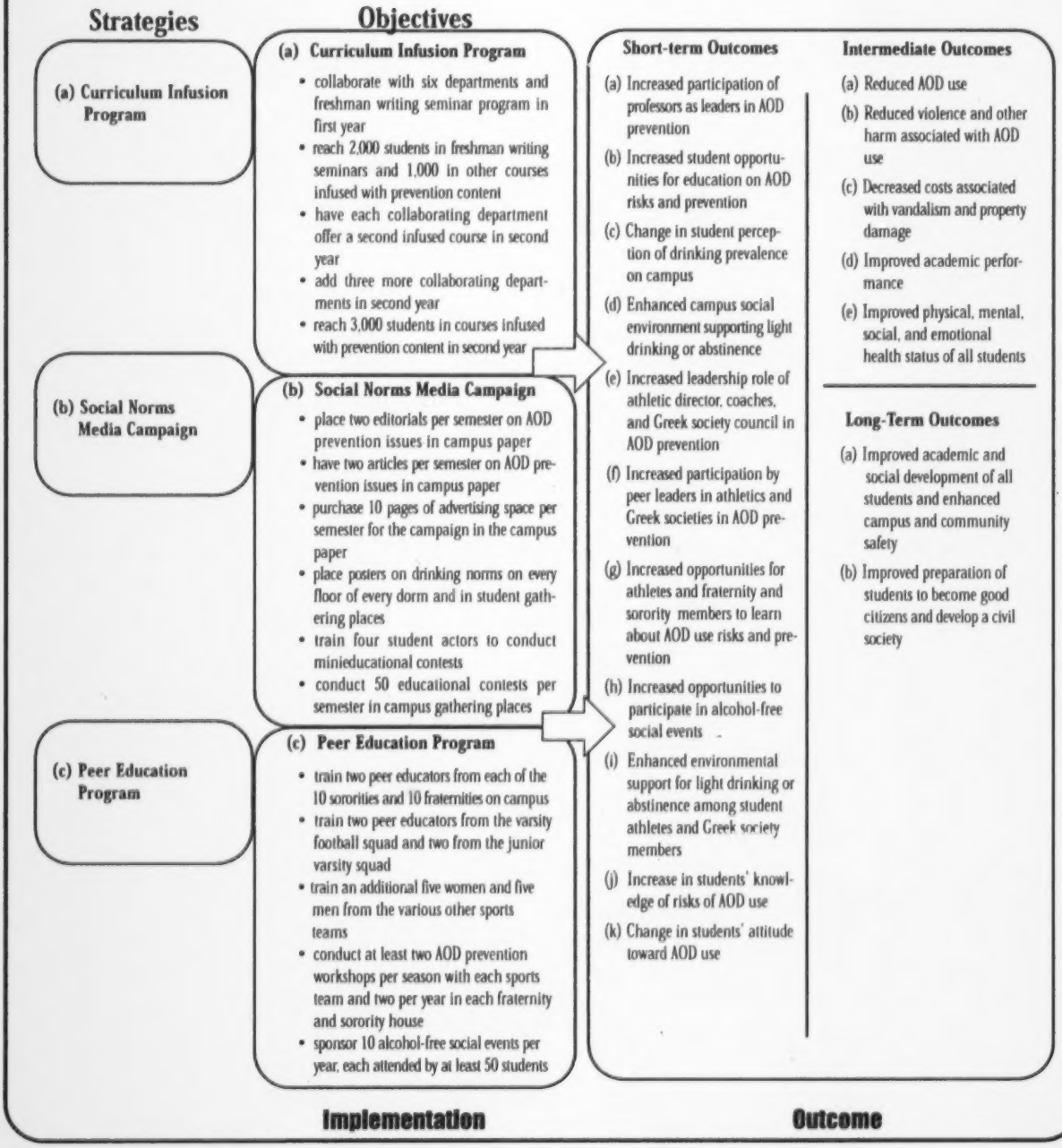
Long-term Outcomes

- Improved academic and social development of all students and enhanced campus and community safety
- Improved preparation of students to become good citizens and develop a civil society

The following page illustrates the various components of Woodson's overall AOD prevention strategy. At the conclusion of the session, Ms. Anderson asked the directors to consider the following two questions. The first question, she explained, was the basis of a process evaluation and the second was an essential starting place for an outcome evaluation. At their next meeting they would begin to hash out their evaluation measures.

- What information do you need to be able to assess whether your program is being implemented as it was intended?
- What information do you need to determine whether the program is making a difference?

LOGIC MODEL FOR WOODSON COLLEGE CAMPUS AOD PREVENTION PROGRAMS


Strategies
Objectives
(a) Curriculum Infusion Program
(b) Social Norms Media Campaign
(c) Peer Education Program
(a) Curriculum Infusion Program
• collaborate with six departments and freshman writing seminar program in first year
• reach 2,000 students in freshman writing seminars and 1,000 in other courses infused with prevention content
• have each collaborating department offer a second infused course in second year
• add three more collaborating departments in second year
• reach 3,000 students in courses infused with prevention content in second year
(b) Social Norms Media Campaign
• place two editorials per semester on AOD prevention issues in campus paper
• have two articles per semester on AOD prevention issues in campus paper
• purchase 10 pages of advertising space per semester for the campaign in the campus paper
• place posters on drinking norms on every floor of every dorm and in student gathering places
• train four student actors to conduct minieducational contests
• conduct 50 educational contests per semester in campus gathering places
(c) Peer Education Program
• train two peer educators from each of the 10 sororities and 10 fraternities on campus
• train two peer educators from the varsity football squad and two from the junior varsity squad
• train an additional five women and five men from the various other sports teams
• conduct at least two AOD prevention workshops per season with each sports team and two per year in each fraternity and sorority house
• sponsor 10 alcohol-free social events per year, each attended by at least 50 students
Short-term Outcomes
(a) Increased participation of professors as leaders in AOD prevention
(b) Increased student opportunities for education on AOD risks and prevention
(c) Change in student perception of drinking prevalence on campus
(d) Enhanced campus social environment supporting light drinking or abstinence
(e) Increased leadership role of athletic director, coaches, and Greek society council in AOD prevention
(f) Increased participation by peer leaders in athletics and Greek societies in AOD prevention
(g) Increased opportunities for athletes and fraternity and sorority members to learn about AOD use risks and prevention
(h) Increased opportunities to participate in alcohol-free social events
(i) Enhanced environmental support for light drinking or abstinence among student athletes and Greek society members
(j) Increase in students' knowledge of risks of AOD use
(k) Change in students' attitude toward AOD use
Intermediate Outcomes
(a) Reduced AOD use
(b) Reduced violence and other harm associated with AOD use
(c) Decreased costs associated with vandalism and property damage
(d) Improved academic performance
(e) Improved physical, mental, social, and emotional health status of all students
Long-Term Outcomes
(a) Improved academic and social development of all students and enhanced campus and community safety
(b) Improved preparation of students to become good citizens and develop a civil society
Implementation
Outcome

Choosing Measures

Each member of the evaluation team came to the meeting with a list of both potential process evaluation and outcome evaluation measures specific to the needs of his or her program.

Evaluation Measures Proposed by the Directors

Curriculum Infusion Program

The most important curriculum infusion evaluation measures were as follows:

Process

- Number of courses with prevention content
- Number of class sessions with prevention content
- Number of faculty participating in infusion
- Number of departments participating in infusion
- Number of students enrolled in courses with infusion
- Assessments of infusion program by participating faculty
- Assessments of infused curriculum by exposed students

Outcome

- Changes in knowledge, attitudes, and behavior of students exposed to infused curriculum

Social Norms Media Campaign

As with any media campaign, the first step in an evaluation is to determine what proportion of the target audience is actually being reached. An evaluation of the campaign would, therefore, require the following information:

Process

- Number of editorials, articles, and advertisements placed in campus paper
- Number of posters displayed in dorms and gathering places on campus
- Number of students exposed to the media message promoting moderation
- Frequency of exposure to the media campaign
- Students' perception of the credibility of the media message
- Number of student actors trained
- Number of contests conducted

Outcomes

- Students' level of recall of media message
- Students' perception of binge drinking rates on campus

Peer Education Program

For an evaluation of the peer education program, the following information would be needed:

Process

- Number of peer educators trained
- Number of teams, fraternities, and sororities represented by the educators
- Number of workshops conducted by the peer educators
- Number of students attending the workshops
- Number of alcohol-free social events sponsored
- Number of students attending the social events

- Assessment of program by peer educators
- Assessment of program by students attending workshops and alcohol-free events

Outcome

- Change in knowledge, attitudes, and behavior of students attending the workshops

After hearing the presentations from each director, Ms. Anderson agreed that the process measures recommended by the program directors were on target but that the outcome measures needed more consideration. She pointed out the need for an evaluation strategy that would not only assess factors specific to each program but also evaluate outcomes relevant to all three programs. Because many students on campus were likely to be exposed to two or even three of the programs over the same period, it would be difficult in most cases to link changes in alcohol-related knowledge, attitudes, or behavior to any one program. In addition, she explained, it would be imperative that they collect baseline information on student AOD use and associated violence before program implementation to be able to show before and after comparisons.

Ms. Anderson suggested that at the next meeting they discuss what information was needed to determine the overall impact of the alcohol and other drug prevention efforts on campus and how they could collect these data in a way that would minimize cost and staff burden.

Assessing Impact

At the next meeting, Ms. Anderson and the program directors debated the pros and cons of several possible indicators of impact, but in the end decided that they would keep the evaluation as simple and clearly focused as possible, choosing the two outcomes they considered the most important. They agreed that a solid evaluation of the impact of prevention efforts required them to track

- patterns of alcohol and other drug use by students
- alcohol- and other drug-related incidents, including acquaintance rape and other interpersonal violence, reported to campus authorities

The incident data were already being logged by the campus police, so culling this information from security records involved minimal work for the prevention staff. To ensure confidentiality, prevention staff summary reports would not include any identifying information about victims or other students involved in incidents reported to campus police.

Tracking alcohol and other drug consumption would be more complicated. In preparation for the meeting, Ms. Anderson researched how drinking patterns had been assessed on other campuses and found that the task involved careful planning in terms of which survey instrument to select, when to administer it, and how to include a representative sampling of the student body.

In reviewing survey instruments used by other colleges, Ms. Anderson found the Core Survey, developed by the Core Institute based at the Center for Alcohol and Other Drug Studies at Southern Illinois University, to be a top choice.[4] This instrument was designed for large campuswide surveys and had been used at hundreds of colleges around the country. A short self-report instrument (it takes only 20 minutes to complete), it had been scientifically validated for use with college populations. The Core Institute had developed a detailed user's manual and a 15-minute videotape explaining how to

use the instrument. Also, the institute staff offered telephone and online technical assistance and would conduct data analysis of survey results for any school administering the Core Survey instrument.

Ms. Anderson realized that, in order to be able to claim that changes seen at Woodson College were due to the prevention programs, the team would need to estimate with some degree of accuracy what drinking patterns would have been like in the absence of the programs. One way to do this was to use a pretest and posttest evaluation design—that is, survey the students both before the programs and again a year later and then assess whether there had been any changes over the period the programs were up and running. The pretest/posttest design would lend some credibility to claims of the programs' effectiveness if changes in drinking patterns had occurred. It would not preclude the possibility, however, that the changes would have occurred anyway regardless of the prevention program. In other words, how would the team demonstrate the programs' effectiveness if Woodson College were to find that drinking rates on campus decreased during the time of the prevention programs, but that at the same time rates had fallen on campuses all across the country where prevention programs were not in place? Members of the evaluation team decided that they needed to identify, at the start date, other colléges with student demographics and drinking patterns similar to Woodson's but without extensive prevention programs, so that any changes in drinking and other drug use patterns could be compared in subsequent years. An additional bonus of using the Core Survey would be that where many other schools had used the measure, Woodson's data could easily be compared with data from other universities.

A third important consideration in tracking drinking on campus was that the survey be administered to a representative sample of students. With 9,000 students enrolled at Woodson, the evaluation team felt it would be too costly and burdensome to survey everyone.

Plus, they knew that, to provide them with statistically sound and representative information, it would be less costly and cumbersome to use random sampling techniques to survey a subset of students.

On the advice of a statistician, they decided to send copies of the Core Survey to a random sample of 1,000 students.[5] Using complete listings of student names and addresses, they would assemble a representative sample by choosing a starting place on the college enrollment list at random, then selecting every ninth student until 1,000 students had been identified. For a college the size of Woodson, a random sample of 1,000 students would be large enough to have statistical power and to accrue sufficient students of color to allow some comparison across race/ethnicity categories.

The surveys would be anonymous, but response postcards with unique identifiers would be attached so that Ms. Anderson and the evaluation staff could target nonresponders with follow-up mailings and calls. To further increase the survey response rate, the evaluation team decided to give cash awards and prizes to a small number of respondents selected by lottery as an incentive to complete the surveys. Their goal was to achieve at least an 80 percent response rate.

With their program objectives and short-term, intermediate, and long-term outcomes defined and their process and outcome measures specified, Ms. Anderson and the evaluation team were confident they were ready to report back to the college administration with their evaluation plan. The next task would be to carry out the baseline data collection using the Core Survey so that implementation of Woodson's comprehensive AOD prevention programming could begin.

Establishing That Implementation of the Programs Took Place

For each of the three programs, Ms. Anderson and her team settled on a series of process measures they believed would be important to a thorough evaluation. Because process measures usually need to be very specific to the program under evaluation, they created their own to collect the information they needed to determine whether the three programs were implemented as intended. The following charts and forms are examples of those used at Woodson College for the process evaluation of each prevention program.

Individual Course Record for Curriculum Infusion Program
Fall Semester

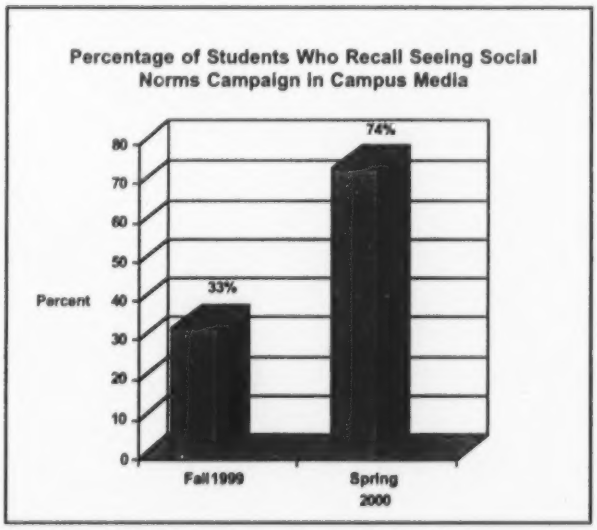
Course title and number	American History, 1945 to the Present (H201)
Professor	Camilla Chang
Department	History
Number of students enrolled	47
Number of class sessions infused with prevention content	2
Estimated number of class hours infused with prevention content	1.5 hours
Type and number of course assignments on prevention content	1 3-page paper, 4 questions on midterm

Curriculum Infusion Program Record
Fall Semester

Total number freshman writing seminars with prevention content	17 (out of 20)
Total number of other courses with prevention content	6
Total number of departments participating	7
Total number of faculty participating	10
Total number of students enrolled in infused courses	1,834

Social Norms Campaign Record
Fall Semester

Number of editorials in campus paper	2
Number of articles in campus paper	1
Number of advertisements in campus paper	7
Number of posters displayed in dorms and campus gathering places	68



Participants' Peer Education Process Evaluation Feedback Form

Please indicate whether you agree or disagree with each of the following statements by placing an X in the appropriate box.

	Agree strongly	Agree	Neither agree nor disagree	Disagree	Disagree strongly
The information was presented clearly.					
The information was provided at the appropriate level of detail.					
The peer educator held my interest.					
The written and visual materials were easy to understand.					

Any other comments?

_____

_____

Peer Education Program Record
Fall Semester

Total number of peer educators trained	25
Total number of athletic teams represented by peer educators	5
Total number of fraternities and sororities represented	13
Total number of workshops conducted by peer educators	17
Total number of students attending workshops	372

Evaluating Student Outcomes

For the outcome evaluation, Ms. Anderson's team had decided to use the well-established Core Survey to measure patterns of alcohol and other drug use by students over time and to compare use rates with other colleges. They also planned to track alcohol- and other drug-related incidents reported to the campus authorities to see if the number of incidents decreased once the programs were implemented. See page 20 for examples of questions included on the Core Survey that Woodson students were to answer.

Once their outcome evaluation was underway, the team were able to collect data to compare alcohol and other drug use patterns of Woodson students with patterns at other colleges before the prevention programs were launched and also to assess some program impact. On pages 21–22 are examples of charts and graphs the Woodson College evaluation team created to represent the results of their outcome evaluation.

As illustrated in the fictional Woodson College case study, evaluating campus AOD prevention programs is a complex process and requires careful planning, implementation, and follow-up. For more guidance on how to evaluate college AOD prevention efforts, readers should contact the Higher Education Center for Alcohol and Other Drug Prevention (see back cover).

Core Survey

17. Within the last year about how often have you used...
(mark one for each line)

	Did not use	Once or twice	Once a month	Two to three times a month	Once a week	3 or 4 times a week	5 or more times a week	Every day
a. Tobacco (smoke, chew, snuff)	○	○	○	○	○	○	○	○
b. Alcohol (beer, wine, liquor)	○	○	○	○	○	○	○	○
c. Marijuana (pot, hash, hash oil)	○	○	○	○	○	○	○	○
d. Cocaine (crack, rock, freebase)	○	○	○	○	○	○	○	○
e. Amphetamines (diet pills, speed)	○	○	○	○	○	○	○	○
f. Sedatives (downers, ludes)	○	○	○	○	○	○	○	○
g. Hallucinogens (LSD, PCP)	○	○	○	○	○	○	○	○
h. Opiates (heroin, smack, horse)	○	○	○	○	○	○	○	○
i. Inhalants (glue, solvents, gas)	○	○	○	○	○	○	○	○
j. Designer drugs (ecstasy, MDMA)	○	○	○	○	○	○	○	○
k. Steroids	○	○	○	○	○	○	○	○
l. Other illegal drugs	○	○	○	○	○	○	○	○

18. During the past 30 days on how many days did you have:
(mark one for each line)

	0 days	1 to 2 days	3 to 5 days	6 to 9 days	10 to 19 days	20 to 29 days	All 30 days
a. Tobacco (smoke, chew, snuff)	○	○	○	○	○	○	○
b. Alcohol (beer, wine, liquor)	○	○	○	○	○	○	○
c. Marijuana (pot, hash, hash oil)	○	○	○	○	○	○	○
d. Cocaine (crack, rock, freebase)	○	○	○	○	○	○	○
e. Amphetamines (diet pills, speed)	○	○	○	○	○	○	○
f. Sedatives (downers, ludes)	○	○	○	○	○	○	○
g. Hallucinogens (LSD, PCP)	○	○	○	○	○	○	○
h. Opiates (heroin, smack, horse)	○	○	○	○	○	○	○
i. Inhalants (glue, solvents, gas)	○	○	○	○	○	○	○
j. Designer drugs (ecstasy, MDMA)	○	○	○	○	○	○	○
k. Steroids	○	○	○	○	○	○	○
l. Other illegal drugs	○	○	○	○	○	○	○

19. How often do you think the average student on your campus uses...
(mark one for each line)

	Not at all	Occasionally	Once a month	Two to three times a month	Once a week	3 or 4 times a week	5 or more times a week	Every day
a. Tobacco (smoke, chew, snuff)	○	○	○	○	○	○	○	○
b. Alcohol (beer, wine, liquor)	○	○	○	○	○	○	○	○
c. Marijuana (pot, hash, hash oil)	○	○	○	○	○	○	○	○
d. Cocaine (crack, rock, freebase)	○	○	○	○	○	○	○	○
e. Amphetamines (diet pills, speed)	○	○	○	○	○	○	○	○
f. Sedatives (downers, ludes)	○	○	○	○	○	○	○	○
g. Hallucinogens (LSD, PCP)	○	○	○	○	○	○	○	○
h. Opiates (heroin, smack, horse)	○	○	○	○	○	○	○	○
i. Inhalants (glue, solvents, gas)	○	○	○	○	○	○	○	○
j. Designer drugs (ecstasy, MDMA)	○	○	○	○	○	○	○	○
k. Steroids	○	○	○	○	○	○	○	○
l. Other illegal drugs	○	○	○	○	○	○	○	○

20. Where have you used...
(mark all that apply)

	Off campus	Fraternity house	Sorority house	Private party	Bar or restaurant	Other
a. Tobacco (smoke, chew, snuff)	○	○	○	○	○	○
b. Alcohol (beer, wine, liquor)	○	○	○	○	○	○
c. Marijuana (pot, hash, hash oil)	○	○	○	○	○	○
d. Cocaine (crack, rock, freebase)	○	○	○	○	○	○
e. Amphetamines (diet pills, speed)	○	○	○	○	○	○
f. Sedatives (downers, ludes)	○	○	○	○	○	○
g. Hallucinogens (LSD, PCP)	○	○	○	○	○	○
h. Opiates (heroin, smack, horse)	○	○	○	○	○	○
i. Inhalants (glue, solvents, gas)	○	○	○	○	○	○
j. Designer drugs (ecstasy, MDMA)	○	○	○	○	○	○
k. Steroids	○	○	○	○	○	○
l. Other illegal drugs	○	○	○	○	○	○

21. Please indicate how often you have experienced the following due to your drinking or drug use during the last year...
(mark one for each line)

	Never	Once	2 to 3 times	4 to 9 times	10 or more times
a. Had a hangover	○	○	○	○	○
b. Performed poorly on a test or important project	○	○	○	○	○
c. Been in trouble with police, residence hall, or other college authorities	○	○	○	○	○
d. Damaged property, pulled fire alarm, etc.	○	○	○	○	○
e. Got into an argument or fight	○	○	○	○	○
f. Got nauseated or vomited	○	○	○	○	○
g. Driven a car while under the influence	○	○	○	○	○
h. Missed a class	○	○	○	○	○
i. Been criticized by someone I know	○	○	○	○	○
j. Thought I might have a drinking or other drug problem	○	○	○	○	○
k. Had a memory loss	○	○	○	○	○
l. Done something I later regretted	○	○	○	○	○
m. Been arrested for DWI/DUI	○	○	○	○	○
n. Have been taken advantage of sexually	○	○	○	○	○
o. Have taken advantage of another sexually	○	○	○	○	○
p. Tried unsuccessfully to stop using	○	○	○	○	○
q. Seriously thought about suicide	○	○	○	○	○
r. Seriously tried to commit suicide	○	○	○	○	○
s. Been hurt or injured	○	○	○	○	○

22. Have any of your family had alcohol or other drug problems: *(mark all that apply)*

- ○ Mother
- ○ Father
- ○ Stepmother
- ○ Stepfather
- ○ Brothers/sisters
- ○ Mother's parents
- ○ Father's parents
- ○ Aunts/uncles
- ○ Spouse
- ○ Children
- ○ None

23. If you volunteer any of your time on or off campus to help others, please indicate the approximate number of hours per month and principal activity:

- ○ Don't volunteer, or less than 1 hour
- ○ 1–4 hours
- ○ 5–9 hours
- ○ 10–15 hours
- ○ 16 or more hours

Principal volunteer activity is: _____

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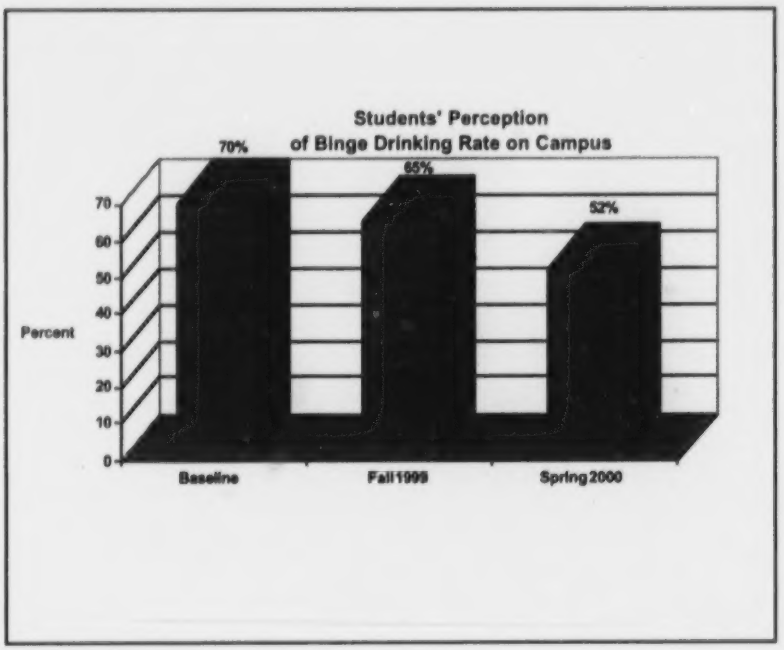


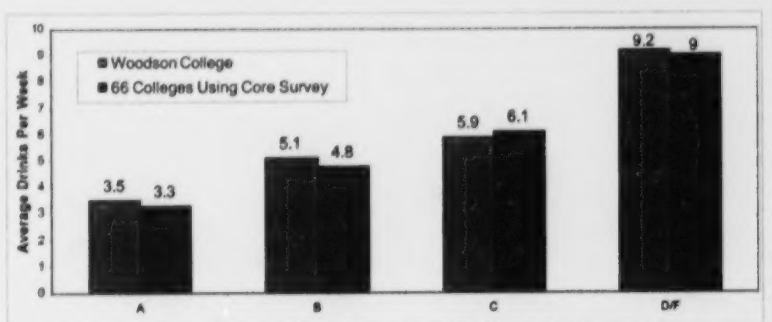
Number of Drinks per Week at Woodson College and 66 Colleges Using Core Survey

Number drinks per week	Percent of Students at Woodson College (n=1,012)	Percent of Students at 66 Colleges Using Core Survey (n=36,627)
None	32.5	36.8
One	13.7	14.8
2 to 5	25.2	23.3
6 to 9	13.0	7.6
10 to 15	10.6	10.4
16 to 20	1.8	2.9
21 or more	3.2	4.3

Percent of Students Using the Most Frequently Used Drugs "in the Last Year"

Drug	Woodson College (n=1,012)	66 Colleges Using Core Survey (n=36,100)
Alcohol	87.2	85.9
Tobacco	35.6	39.6
Marijuana	32.8	24.4
Hallucinogens	4.3	5.5
Amphetamines	4.7	5.4
Cocaine	2.5	3.4

Average Number of Drinks per Week, Listed by Grade Point Average



Notes

[1] More information about these three prevention strategies are presented in the following publications available from the Higher Education Center for Alcohol and Other Drug Prevention: *Making the Link: Academics and Prevention* (in press) by Barbara Ryan and William DeJong; *A Social Norms Approach to Preventing Binge Drinking at Colleges and Universities* (1996) by Michael P. Haines; and *Alcohol and Other Drug Prevention: A Bulletin for Fraternity and Sorority Advisers* by Tammy Enos and Tanutda Pittayathikhun.

[2] This section on curriculum infusion draws on the work of the Network for Dissemination of Curriculum Infusion, presented in the monograph *Characteristics of Successful Curriculum Infusion Programs: Analysis Conducted by the Network for Dissemination of Curriculum Infusion*, Northeastern Illinois University, 1996.

[3] This discussion of a social norms strategy is based on the Higher Education Center for Alcohol and Other Drug Prevention publication *A Social Norms Approach to Preventing Binge Drinking at Colleges and Universities* (1996) by Michael P. Haines.

[4] More information on the Core Survey and copies of the questionnaire are available through the Center for Alcohol and Other Drug Studies, Student Health Programs, Southern Illinois University—Carbondale, Carbondale, IL 62901-6802; phone (618)453-4420.

[5] The survey methodology used in this case study is based on that designed by Wechsler and colleagues for the Harvard College Alcohol Study and described in the survey methodology guide *Preventing Alcohol-Related Problems on Campus: Methods for Assessing Student Use of Alcohol and Other Drugs* by William DeJong and Henry Wechsler and available from the Higher Education Center for Alcohol and Other Drug Prevention.

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A College Case Study

A SUPPLEMENT TO
UNDERSTANDING EVALUATION:
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